

# 24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 1  
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) <b>SEIU COPE (Service Employees International Union Committee On Political Education)</b>			<b>FEC IDENTIFICATION NUMBER ▼</b> <div style="border: 1px solid black; padding: 2px; display: inline-block;"> <b>C</b> C00004036       </div>		
Check If <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on					
Full Name (Last, First, Middle Initial) of Payee <b>Murphy Vogel Askew Reilly LLC</b>			Date MM / DD / YYYY 08 / 04 / 2012		
Mailing Address 901 North Washington Street Suite 400			Amount 36012.25		
City Alexandria      State VA      Zip Code 22314-1535		Transaction ID : D289193			
Purpose of Expenditure TV Ad Buy & Production		Category/Type 004		Office Sought: <input checked="" type="checkbox"/> House    State: FL <input type="checkbox"/> Senate    District: 26 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JOSE ANTONIO GARCIA				Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 72024.49			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
Full Name (Last, First, Middle Initial) of Payee <b>Murphy Vogel Askew Reilly LLC</b>			Date MM / DD / YYYY 08 / 04 / 2012		
Mailing Address 901 North Washington Street Suite 400			Amount 36012.24		
City Alexandria      State VA      Zip Code 22314-1535		Transaction ID : D289194			
Purpose of Expenditure TV Ad Buy & Production		Category/Type 004		Office Sought: <input checked="" type="checkbox"/> House    State: FL <input type="checkbox"/> Senate    District: 26 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: DAVID RIVERA				Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 72024.49			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____		
(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....			72024.49		
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....					
(c) <b>TOTAL</b> Independent Expenditures.....			72024.49		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Eliseo Medina</i>		[Electronically Filed]		Date MM / DD / YYYY 08 / 05 / 2012	